

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Koichi TOYODA et al.

Title: TEMPORARY WORKER INFORMATION MANAGEMENT SYSTEM,  
TEMPORARY WORKER INFORMATION MANAGEMENT METHOD,  
DISPATCHING TERMINAL, JOB OFFER TERMINAL, DISPATCHING  
INFORMATION SERVER, AND RECORDING MEDIUM

Appl. No.: Unassigned

Filing Date: 06/05/2001

Examiner: Unassigned

Art Unit: Unassigned

**UTILITY PATENT APPLICATION**  
**TRANSMITTAL**

Commissioner for Patents  
Box PATENT APPLICATION  
Washington, D.C. 20231

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional  
utility patent application of:

Koichi TOYODA

Ryosuke GION

Enclosed are:

- [ X ] Specification, Claim(s), and Abstract (50 pages).
- [ X ] Formal drawings (13 sheets, Figures 1-15).
- [ X ] Declaration and Power of Attorney (2 pages).
- ☒ [ X ] Assignment of the invention to NEC CORPORATION.
- [ X ] Assignment Recordation Cover Sheet.
- [ X ] Information Disclosure Statement.
- [ X ] Form PTO-1449 with copies of 1 listed reference(s).

☒ Claim for Convention Priority w/ certified document

The filing fee is calculated below:

	Claims as Filed		Included in Basic Fee		Extra Claims		Rate		Fee Totals
Basic Fee							\$710.00		\$710.00
Total Claims:	16	-	20	=	0	x	\$18.00	=	\$0.00
Independents:	5	-	3	=	2	x	\$80.00	=	\$160.00
If any Multiple Dependent Claim(s) present:						+	\$270.00	=	\$0.00
							SUBTOTAL:	=	\$870.00
<input type="checkbox"/> Small Entity Fees Apply (subtract 1/2 of above):								=	\$0.00
							TOTAL FILING FEE:	=	\$870.00
Assignment Recordation Fee:						+	\$40.00	=	\$40.00
							TOTAL FEE	=	\$910.00

- ☒ A check in the amount of \$910.00 to cover the filing fee and fee for recordation of Assignment is enclosed.
- ☐ The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

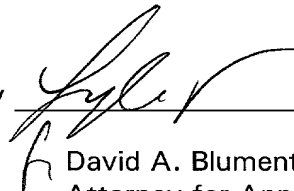
Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date June 5, 2001

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